

**Experiment Number:** 20203 - 04

**Test Type:** CHRONIC

**Route:** GAVAGE

**Species/Strain:** MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

**Lab:** BAT

F1\_M3

**NTP Study Number:** C20203

**Lock Date:** 11/04/2010

**Cage Range:** ALL

**Date Range:** ALL

**Reasons For Removal:** ALL

**Removal Date Range:** ALL

**Treatment Groups:** Include ALL

**Study Gender:** Both

**TDMSE Version:** 3.0.1.0\_004

**PWG Approval Date:** NONE

**Experiment Number:** 20203 - 04

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## Lab: BAT

## **ALIMENTARY SYSTEM**

\* Total animals with tissue examined microscopically; Total animals with tumor

## M Missing tissue

† Tissue examined microscopically

A - Autolysis precludes evaluation

X Lesion present

X .. Lesion present  
I .. Insufficient tissue

**BLANK** Not examined microscopically

Experiment Number: 20203 - 01

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Lab: BAT

B6C3F1 MICE MALE	DAY ON TEST																					
		0 7 3 1	0 5 9 4	0 7 3 1	0 7 3 2	0 7 3 1	0 6 1	0 7 2	0 5 3	0 7 2	0 7 3	0 7 3	0 7 1	0 5 0	0 7 2	0 7 2	0 6 1	0 7 3	0 7 3	0 5 8		
0 mg/kg	ANIMAL ID	0 0 0 2 6	0 0 0 2 7	0 0 0 3 8	0 0 0 3 9	0 0 0 4 0	0 0 0 4 1	0 0 0 4 2	0 0 0 4 3	0 0 0 4 4	0 0 0 4 5	0 0 0 4 6	0 0 0 4 7	0 0 0 4 8	0 0 0 4 9	0 0 0 5 0	0 0 0 4 1	0 0 0 4 2	0 0 0 4 3	0 0 0 4 4	0 0 0 4 5	0 0 0 4 6
		0 0 0 2 6	0 0 0 2 7	0 0 0 3 8	0 0 0 3 9	0 0 0 4 0	0 0 0 4 1	0 0 0 4 2	0 0 0 4 3	0 0 0 4 4	0 0 0 4 5	0 0 0 4 6	0 0 0 4 7	0 0 0 4 8	0 0 0 4 9	0 0 0 5 0	0 0 0 4 1	0 0 0 4 2	0 0 0 4 3	0 0 0 4 4	0 0 0 4 5	0 0 0 4 6

## **ALIMENTARY SYSTEM**

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Gallbladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Intestine Small, Duodenum	+	A	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	A	43
Intestine Small, Ileum	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	47
Intestine Small, Jejunum Carcinoma	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	A	45
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Hemangioma																X					2
Hemangiosarcoma																X					3
Hepatoblastoma																					2
Hepatocellular Adenoma		X		X	X	X	X	X			X						X	X	X	X	19
Hepatocellular Adenoma, Multiple		X	X	X	X	X	X					X					X	X	X	X	16
Hepatocellular Carcinoma		X	X							X		X	X	X	X	X		X	X	X	13
Hepatocellular Carcinoma, Multiple						X															2
Lymphoma Malignant								X				X									1
Mesentery																	+				1

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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Species/Strain: MICE/B6C3F1

Lab: BAT

B6C3F1 MICE MALE	DAY ON TEST																					* TOTALS	
		0 7 3 1	0 5 9 4	0 7 3 1	0 7 3 2	0 7 3 1	0 7 3 2	0 7 3 2	0 7 3 1	0 7 3 0	0 5 4 7	0 7 2 1	0 7 3 2	0 7 3 1	0 6 9	0 7 2	0 7 3 1	0 7 2	0 7 3 2	0 5 8 7			
0 mg/kg	ANIMAL ID	0 0 0 0 2 6	0 0 0 0 2 7	0 0 0 0 3 8	0 0 0 0 3 9	0 0 0 0 3 0	0 0 0 0 3 1	0 0 0 0 3 2	0 0 0 0 3 3	0 0 0 0 3 4	0 0 0 0 5	0 0 0 0 6	0 0 0 0 7	0 0 0 0 8	0 0 0 0 9	0 0 0 0 0	0 0 0 0 1	0 0 0 0 2	0 0 0 0 3	0 0 0 0 4	0 0 0 0 5	0 0 0 0 6	0 0 0 0 7
Pancreas		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Salivary Glands		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Stomach, Forestomach Lymphoma Malignant		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1	
Stomach, Glandular		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
<b>CARDIOVASCULAR SYSTEM</b>																							
Blood Vessel		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Heart		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
<b>ENDOCRINE SYSTEM</b>																							
Adrenal Cortex Subcapsular, Adenoma		+	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	49 1	
Adrenal Medulla		+	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	49	
Islets, Pancreatic Adenoma Carcinoma		+	+	+	+	+	+	+	X	+	+	+	+	+	+	+	+	+	+	+	+	50 1 1	
Parathyroid Gland		M	M	+	+	M	+	+	M	+	+	+	+	+	M	+	+	+	+	+	+	41	
Pituitary Gland Pars Distalis, Adenoma		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	49 1	

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M .. Missing tissue

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**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

## **GENERAL BODY SYSTEM**

NONE

## **GENITAL SYSTEM**

Coagulating Gland Sarcoma		1
		1
Epididymis	+	50
Preputial Gland	+	50
Prostate	+	50
Seminal Vesicle	+	50
Testes	+	50
Interstitial Cell, Adenoma	X	1

## HEMATOPOIETIC SYSTEM

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Species/Strain: MICE/B6C3F1

Lab: BAT

B6C3F1 MICE MALE	DAY ON TEST																					* TOTALS	
		0 7 3 1	0 5 9 4	0 7 3 1	0 7 3 2	0 7 3 1	0 7 3 2	0 5 3 2	0 7 3 2	0 7 3 1	0 7 3 0	0 5 4 7	0 7 2 1	0 7 3 2	0 7 3 1	0 6 9	0 7 2	0 7 3 1	0 7 2	0 7 3 2	0 5 8 7		
0 mg/kg	ANIMAL ID	0 0 0 0 2 6	0 0 0 0 2 7	0 0 0 0 3 8	0 0 0 0 3 9	0 0 0 0 3 0	0 0 0 0 3 1	0 0 0 0 3 2	0 0 0 0 3 3	0 0 0 0 3 4	0 0 0 0 5	0 0 0 0 6	0 0 0 0 7	0 0 0 0 8	0 0 0 0 9	0 0 0 0 0	0 0 0 0 1	0 0 0 0 2	0 0 0 0 3	0 0 0 0 4	0 0 0 0 5	0 0 0 0 6	0 0 0 0 7
Lymph Node, Mandibular		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Lymph Node, Mesenteric		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Hemangiosarcoma																						1	
Lymphoma Malignant																						2	
Spleen		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Hemangiosarcoma		X																				2	
Lymphoma Malignant																						3	
Thymus		M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	44	
<b>INTEGUMENTARY SYSTEM</b>																							
Mammary Gland		M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	0	
Skin		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Carcinoma, Metastatic, Kidney																						1	
<b>MUSCULOSKELETAL SYSTEM</b>																							
Bone		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
<b>NERVOUS SYSTEM</b>																							
Brain		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
<b>RESPIRATORY SYSTEM</b>																							
Lung		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Alveolar/Bronchiolar Adenoma		X			X			X			X		X		X		X		X		X		12

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First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

		DAY ON TEST	0 7 3 1	0 5 9 4	0 7 3 1	0 7 3 2	0 7 1	0 5 3	0 7 2	0 7 3	0 7 2	0 7 3	0 7 1	0 5 0	0 7 2	0 7 3	0 7 1	0 6 9	0 7 2	0 7 3	0 7 1	0 5 7	0 7 3	0 7 2	0 5 8		
		ANIMAL ID	0 0 0 2 6	0 0 0 2 7	0 0 0 2 8	0 0 0 1	0 0 0 2	0 0 3	0 0 3	0 0 3	0 0 3	0 0 3	0 0 3	0 0 4	0 0 5	* TOTALS											
B6C3F1 MICE MALE	0 mg/kg	X												X													
Alveolar/Bronchiolar Carcinoma, Multiple																											2
Carcinoma, Metastatic, Kidney																											1
Hepatocellular Carcinoma, Metastatic, Liver																											4
Mediastinum, Hepatocellular Carcinoma, Metastatic, Liver																											1
Nose		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Trachea		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
<b>SPECIAL SENSES SYSTEM</b>																											
Eye		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Harderian Gland		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Adenoma																											7
Carcinoma																											1
<b>URINARY SYSTEM</b>																											
Kidney		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Lymphoma Malignant																											1
Bilateral, Renal Tubule, Carcinoma																											2
Renal Tubule, Adenoma																											1
Urinary Bladder		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
<b>SYSTEMIC LESIONS</b>																											
Multiple Organ		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Lymphoma Malignant																											4

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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X .. Lesion present

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**Species/Strain:** MICE/B6C3F1

Lab: BAT

DAY ON TEST																					males (cont...)	
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
7	7	6	7	5	7	7	5	7	7	7	7	4	6	7	7	7	7	7	7	7	6	7
3	3	9	3	2	3	3	4	3	3	3	3	6	9	3	3	3	3	3	3	3	3	0
1	1	3	3	2	8	0	1	0	6	1	1	1	2	3	0	1	0	2	0	1	2	2
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	5	5	5	5	5	5	5	5	5	6	6	6	6	6	6	6	6	7	7	7	7	7
	1	1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	6	7	8	9	0	1

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

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X., Lesion present

**ANK.** Not examined microscopically

#### I. Insufficient tissue

WITNESS EXAMINED MICROSCOPICALLY

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Lab: BAT

		DAY ON TEST	0 7 3 1	0 6 9 3	0 7 2 8	0 7 3 0	0 5 4 6	0 7 3 1	0 7 3 1	0 7 3 1	0 6 9 3	0 7 3 0	0 7 3 1	0 7 3 2	0 7 3 0	0 7 3 1	0 7 3 2	0 7 3 0	0 7 3 1	0 7 3 2	0 6 0 2				
		ANIMAL ID	0 0 0 5 1	0 0 0 5 2	0 0 0 5 3	0 0 0 5 4	0 0 0 5 5	0 0 0 5 6	0 0 0 5 7	0 0 0 8	0 0 0 9	0 0 0 0	0 0 0 1	0 0 0 2	0 0 0 3	0 0 0 4	0 0 0 5	0 0 0 6	0 0 0 7	0 0 0 8	0 0 0 9	0 0 0 0	0 0 0 0	males (cont...)	
B6C3F1 MICE MALE																									
30 mg/kg																									
Squamous Cell Carcinoma, Metastatic, Stomach, Forestomach																								X	
Mesentery																								+	
Pancreas			+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Salivary Glands			+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Stomach, Forestomach Squamous Cell Carcinoma			+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Stomach, Glandular Adenoma Lymphoma Malignant			+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Tooth Odontoma																									
<b>CARDIOVASCULAR SYSTEM</b>																									
Blood Vessel			+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Heart Hepatocholangiocarcinoma, Metastatic, Liver Lymphoma Malignant			+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
																								X	
<b>ENDOCRINE SYSTEM</b>																									
Adrenal Cortex			+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Adrenal Medulla			+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	

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Lab: BAT

B6C3F1 MICE MALE	30 mg/kg	DAY ON TEST																									males (cont...)
			07	06	07	05	07	07	05	07	07	07	07	04	06	07	07	07	07	07	07	07	07	06	07		
ANIMAL ID	01	31	32	28	00	1	06	11	11	11	22	33	22	33	00	10	20	30	11	21	31	22	33	00	12		

Pheochromocytoma Benign

X

Islets, Pancreatic  
Adenoma

+ X

Parathyroid Gland

M + + M M M M + + M M + + M + + + + + + + + + + M M

Pituitary Gland

+ +

Thyroid Gland  
Follicular Cell, Adenoma

+ +

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

Epididymis

+ +

Preputial Gland

+ +

Prostate

+ +

Seminal Vesicle

+ +

Testes  
Interstitial Cell, Adenoma

+ X X

## HEMATOPOIETIC SYSTEM

Bone Marrow

+ +

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**First Dose M/F:** 07/10/07 / 07/09/07

**Species/Strain:** MICE/B6C3F1

## Lab: BAT

| DAY ON TEST | males<br>(cont...) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|             | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| 7           | 6                  | 7 | 5 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 4 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 |
| 3           | 9                  | 3 | 2 | 3 | 3 | 3 | 4 | 3 | 3 | 3 | 3 | 6 | 9 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| 1           | 1                  | 3 | 2 | 8 | 0 | 1 | 0 | 6 | 1 | 1 | 1 | 2 | 2 | 3 | 0 | 1 | 0 | 2 | 1 | 2 | 2 |
| ANIMAL ID   | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 5                  | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |
|             | 1                  | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 |

## **URINARY SYSTEM**

Kidney  
Hepatocarcinoma  
Lymphoma Malignant

## Urinary Bladder Lymphoma Malignant

## **SYSTEMIC LESIONS**

## Multiple Organ Histiocytic Sarcoma Lymphoma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type: CHRONIC**

#### Green tea extract

Time Report Requested: 13:10:01

## Route: GAVAGE

**CAS Number:** GREENTEAEXTR

**First Dose M/F:** 07/10/07 / 07/09/07

**Species/Strain:** MICE/B6C3F1

## Lab: BAT

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X., Lesion present

ANK .. Not examined microscopically

#### I. Insufficient tissue

WITNESS NOT EXAMINED MICROSCOPICALLY



Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE MALE                       | 30 mg/kg | DAY ON TEST |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | * TOTALS |
|--|----------|-------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----------|
|  |          |             | 0<br>7<br>3<br>1 | 0<br>6<br>3<br>7 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>6<br>4<br>2 | 0<br>7<br>4<br>1 | 0<br>6<br>1<br>3 | 0<br>7<br>1<br>3 | 0<br>6<br>1<br>2 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>1 | 0<br>6<br>5<br>8 | 0<br>7<br>2<br>1 | 0<br>6<br>7<br>1 | 0<br>7<br>3<br>1 |   |          |
| ANIMAL ID                              |          |             | 0<br>0<br>0<br>0 |   |          |
| Pheochromocytoma Benign                |          |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 1        |
| Islets, Pancreatic Adenoma             |          |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50<br>3  |
| Parathyroid Gland                      |          |             | +                | +                | +                | +                | M                | M                | M                | M                | +                | +                | +                | M                | M                | +                | M                | M                | +                | +                | +                | + | 30       |
| Pituitary Gland                        |          |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |
| Thyroid Gland Follicular Cell, Adenoma |          |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50<br>2  |

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Epididymis                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Preputial Gland                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Prostate                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Seminal Vesicle                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Testes Interstitial Cell, Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>3 |

## HEMATOPOIETIC SYSTEM

|             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE MALE                            | 30 mg/kg | DAY ON TEST | ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |    | * TOTALS |
|---|----------|-------------|-----------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|---|----|----------|
|   |          |             |           | 0<br>7<br>3<br>1 | 0<br>6<br>3<br>7 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>6<br>4<br>2 | 0<br>7<br>4<br>1 | 0<br>6<br>3<br>1 | 0<br>7<br>2<br>2 | 0<br>7<br>8<br>8 | 0<br>7<br>2<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>1<br>1 | 0<br>6<br>5<br>8 | 0<br>7<br>2<br>1 | 0<br>6<br>7<br>8 | 0<br>7<br>3<br>1 | 0<br>6<br>7<br>1 | 0<br>7<br>3<br>1 |   |   |    |          |
| Histiocytic Sarcoma                         |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | X | 1  |          |
| Lymph Node                                  |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | + | 3  |          |
| Lymphoma Malignant                          |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 1  |          |
| Bronchial, Lymphoma Malignant               |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 1  |          |
| Lymph Node, Mandibular                      |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 50 |          |
| Lymphoma Malignant                          |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | X | 2  |          |
| Lymph Node, Mesenteric                      |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 49 |          |
| Histiocytic Sarcoma                         |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | X | 1  |          |
| Lymphoma Malignant                          |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 2  |          |
| Spleen                                      |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 50 |          |
| Hemangiosarcoma                             |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 1  |          |
| Lymphoma Malignant                          |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | X | 3  |          |
| Thymus                                      |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 49 |          |
| Alveolar/Bronchiolar Carcinoma, Metastatic, |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 1  |          |
| Lung  |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 1  |          |
| Lymphoma Malignant                          |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | 1  |          |
| <b>INTEGUMENTARY SYSTEM</b>                 |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |    |          |
| Mammary Gland                               |          |             |           | M                | M                | +                | +                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M | M | 2  |          |
| Skin  |          |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + | 50 |          |
| <b>MUSCULOSKELETAL SYSTEM</b>               |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |    |          |
| Bone  |          |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + | 50 |          |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

|                  |   | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | DAY ON TEST |   |   |
|------------------|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------------|---|---|
|                  |   | ANIMAL ID   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID   |   |   |
| B6C3F1 MICE MALE |   | 30 mg/kg    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS    |   |   |
| 0                | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0           | 0 | 0 |
| 7                | 6 | 7           | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7           | 7 | 7 |
| 3                | 3 | 3           | 3 | 3 | 3 | 0 | 3 | 3 | 3 | 2 | 3 | 2 | 3 | 3 | 2 | 4 | 3 | 1 | 3 | 1 | 3 | 2 | 8 | 2 | 3 | 2           | 1 | 1 |
| 1                | 1 | 7           | 0 | 0 | 3 | 2 | 2 | 1 | 3 | 2 | 1 | 3 | 2 | 4 | 1 | 3 | 1 | 1 | 2 | 8 | 2 | 3 | 2 | 1 | 1 | 1           | 1 | 1 |
| 0                | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0           | 0 | 0 |
| 0                | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0           | 0 | 0 |
| 0                | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0           | 0 | 1 |
| 7                | 7 | 7           | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9           | 9 | 0 |
| 6                | 6 | 7           | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0           | 0 |   |

Skeletal Muscle

+ 1

## NERVOUS SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Brain                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Hepatocarcinoma, Metastatic, Liver |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

## RESPIRATORY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Alveolar/Bronchiolar Adenoma                |   |   |   |   |   |   | X |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 7 |
| Alveolar/Bronchiolar Adenoma, Multiple      |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Alveolar/Bronchiolar Carcinoma              |   |   | X |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Alveolar/Bronchiolar Carcinoma, Multiple    |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4 |
| Carcinoma, Metastatic, Harderian Gland      |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Hepatocellular Carcinoma, Metastatic, Liver |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 5 |
| Hepatocarcinoma, Metastatic, Liver          |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Lymphoma Malignant                          |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Nose | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

## SPECIAL SENSES SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Carcinoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

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Green tea extract

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First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

|                         |  | DAY ON TEST | B6C3F1 MICE MALE           |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |          | * TOTALS |
|-------------------------|--|-------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------|----------|
|                         |  |             | 0<br>7<br>3<br>1           | 0<br>6<br>3<br>7           | 0<br>7<br>3<br>0           | 0<br>7<br>3<br>3           | 0<br>7<br>3<br>2           | 0<br>7<br>3<br>1           | 0<br>6<br>4<br>2           | 0<br>7<br>4<br>1           | 0<br>6<br>1<br>3           | 0<br>7<br>1<br>3           | 0<br>6<br>1<br>2           | 0<br>7<br>2<br>8           | 0<br>7<br>1<br>2           | 0<br>7<br>2<br>2           | 0<br>7<br>3<br>1           | 0<br>6<br>5<br>8           | 0<br>7<br>2<br>1           | 0<br>7<br>3<br>1           | 0<br>6<br>7<br>1           | 0<br>7<br>3<br>1           | 0<br>7<br>2<br>1           | 0<br>7<br>3<br>1           | 0<br>6<br>7<br>1           |          |          |
|                         |  | ANIMAL ID   | 0<br>0<br>0<br>0<br>7<br>6 | 0<br>0<br>0<br>0<br>7<br>7 | 0<br>0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>0<br>9<br>9 | * TOTALS |          |
| <b>B6C3F1 MICE MALE</b> |  |             | 0<br>6<br>3<br>7           | 0<br>7<br>3<br>0           | 0<br>7<br>3<br>3           | 0<br>7<br>3<br>2           | 0<br>7<br>3<br>1           | 0<br>6<br>4<br>2           | 0<br>7<br>4<br>1           | 0<br>6<br>1<br>3           | 0<br>7<br>1<br>3           | 0<br>6<br>1<br>2           | 0<br>7<br>2<br>8           | 0<br>7<br>1<br>2           | 0<br>7<br>2<br>2           | 0<br>7<br>3<br>1           | 0<br>6<br>5<br>8           | 0<br>7<br>2<br>1           | 0<br>7<br>3<br>1           | 0<br>6<br>7<br>1           | 0<br>7<br>3<br>1           | 0<br>7<br>2<br>1           | 0<br>7<br>3<br>1           | 0<br>6<br>7<br>1           | * TOTALS                   |          |          |
| <b>30 mg/kg</b>         |  |             | 0<br>0<br>0<br>0<br>0<br>0 |                            |                            |          |          |

**URINARY SYSTEM**

Kidney  
 Hepatocholangiocarcinoma, Metastatic, Liver  
 Lymphoma Malignant

Urinary Bladder  
 Lymphoma Malignant

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**SYSTEMIC LESIONS**

Multiple Organ  
 Histiocytic Sarcoma  
 Lymphoma Malignant

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| X | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 6 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type: CHRONIC**

#### Green tea extract

**Time Report Requested:** 13:10:01

## **Route: GAVAGE**

**CAS Number:** GREENTEAEXTR

**First Dose M/F:** 07/10/07 / 07/09/07

**Species/Strain:** MICE/B6C3F1

## Lab: BAT

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

#### A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

#### I .. Insufficient tissue

#### DE WIT: NOT EXAMINED MICROSCOPICALLY









Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE MALE | 100 mg/kg | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  | * TOTALS |          |
|------------------|-----------|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|----------|----------|
|                  |           |             | 0<br>7<br>3<br>2      | 0<br>6<br>8<br>5      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      |  |          |          |
| ANIMAL ID        |           |             | 0<br>0<br>1<br>2<br>6 | 0<br>0<br>1<br>2<br>7 | 0<br>0<br>1<br>2<br>8 | 0<br>0<br>1<br>3<br>0 | 0<br>0<br>1<br>3<br>1 | 0<br>0<br>1<br>3<br>2 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>3<br>4 | 0<br>0<br>1<br>3<br>5 | 0<br>0<br>1<br>3<br>6 | 0<br>0<br>1<br>3<br>7 | 0<br>0<br>1<br>3<br>8 | 0<br>0<br>1<br>3<br>9 | 0<br>0<br>1<br>4<br>0 | 0<br>0<br>1<br>4<br>1 | 0<br>0<br>1<br>4<br>2 | 0<br>0<br>1<br>4<br>3 | 0<br>0<br>1<br>4<br>4 | 0<br>0<br>1<br>4<br>5 | 0<br>0<br>1<br>4<br>6 | 0<br>0<br>1<br>4<br>7 | 0<br>0<br>1<br>4<br>8 | 0<br>0<br>1<br>4<br>9 |  |          |          |
|                  |           |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |          | * TOTALS |

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Esophagus                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Gallbladder                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Intestine Large, Cecum<br>Lymphoma Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Intestine Large, Colon<br>Leiomyoma          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Intestine Large, Rectum                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Duodenum<br>Adenoma         | + | + | + | A | + | + | A | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 47 |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Intestine Small, Ileum                       | + | + | + | A | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |   |
| Intestine Small, Jejunum<br>Adenocarcinoma   | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Peyer's Patch, Lymphoma Malignant            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |    | 1 |
| Liver  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Hemangioma                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Hemangiosarcoma                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Hepatocellular Adenoma                       | X |   |   |   | X | X |   |   |   | X |   |   |   |   | X | X | X |   |   |   |   |   |   |   |   | 19 |   |
| Hepatocellular Adenoma, Multiple             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 6 |
| Hepatocellular Carcinoma                     |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |    | 8 |
| Hepatocellular Carcinoma, Multiple           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |    | 5 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE MALE                      | 100 mg/kg | DAY ON TEST | ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |    | * TOTALS |
|---------------------------------------|-----------|-------------|-----------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----|----|----------|
|                                       |           |             |           | 0<br>7<br>3<br>2 | 0<br>6<br>8<br>5 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 |   |    |    |          |
| Lymphoma Malignant                    |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | X  | 1  |          |
| Mesentery                             |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 2  |          |
| Pancreas                              |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |    |          |
| Salivary Glands                       |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |    |          |
| Stomach, Forestomach                  |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |    |          |
| Stomach, Glandular Lymphoma Malignant |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |    |          |
|                                       |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | X  | 1  |          |
| <b>CARDIOVASCULAR SYSTEM</b>          |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |    |          |
| Blood Vessel                          |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +  | 50 |          |
| Heart Lymphoma Malignant              |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +  | 50 |          |
|                                       |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | X  | 1  |          |
| <b>ENDOCRINE SYSTEM</b>               |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |    |          |
| Adrenal Cortex                        |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +  | 50 |          |
| Adenoma                               |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1  |          |
| Subcapsular, Adenoma                  |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1  |          |
| Adrenal Medulla                       |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +  | 50 |          |
| Pheochromocytoma Benign               |           |             |           | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1  |          |
| Islets, Pancreatic                    |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +  | 50 |          |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE MALE  | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |          |    |
|-------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----------|----|
|                   |             | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>5 | 0<br>7 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>5 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 |          |          |    |
| 100 mg/kg         | ANIMAL ID   | 0<br>0   | * TOTALS |    |
| Parathyroid Gland |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | M      | +      | +      | +      | +      | M      | +        | +        | 46 |
| Pituitary Gland   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | M      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 49       |    |
| Thyroid Gland     |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |    |

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Epididymis         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 1  |
| Preputial Gland    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 1  |
| Prostate           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Seminal Vesicle    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Testes             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

## HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Renal, Hemangiosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Type: CHRONIC**

## **Route: GAVAGE**

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

Time Report Requested: 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Type:** CHRONIC

## Route: GAVAGE

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

Lab: BAT

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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X .. Lesion present

#### I .. Insufficient tissue

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Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE MALE                   | 300 mg/kg | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | males<br>(cont...) |   |
|------------------------------------|-----------|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------------------|---|
|                                    |           |             | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>4<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      |                       |                    |   |
| ANIMAL ID                          |           |             | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>5<br>2 | 0<br>0<br>1<br>5<br>3 | 0<br>0<br>1<br>5<br>4 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>5<br>6 | 0<br>0<br>1<br>5<br>7 | 0<br>0<br>1<br>5<br>8 | 0<br>0<br>1<br>5<br>9 | 0<br>0<br>1<br>6<br>0 | 0<br>0<br>1<br>6<br>1 | 0<br>0<br>1<br>6<br>2 | 0<br>0<br>1<br>6<br>3 | 0<br>0<br>1<br>6<br>4 | 0<br>0<br>1<br>6<br>5 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>6<br>7 | 0<br>0<br>1<br>6<br>8 | 0<br>0<br>1<br>6<br>9 | 0<br>0<br>1<br>7<br>0 | 0<br>0<br>1<br>7<br>1 | 0<br>0<br>1<br>7<br>2 | 0<br>0<br>1<br>7<br>3 | 0<br>0<br>1<br>7<br>4 |                    |   |
| Esophagus                          |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |
| Gallbladder                        |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |
| Intestine Large, Cecum             |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |
| Intestine Large, Colon             |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |
| Intestine Large, Rectum            |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |
| Intestine Small, Duodenum          |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |
| Intestine Small, Ileum             |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |
| Intestine Small, Jejunum           |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |
| Adenocarcinoma                     |           | X           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |
| Adenoma                            |           |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |
| Liver                              |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |
| Hepatoblastoma                     |           |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    | X |
| Hepatocellular Adenoma             |           |             | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |
| Hepatocellular Adenoma, Multiple   |           |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |
| Hepatocellular Carcinoma           |           |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    | X |
| Hepatocellular Carcinoma, Multiple |           |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |
| Mesentery                          |           |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    | + |
| Pancreas                           |           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE MALE                         | 300 mg/kg | DAY ON TEST | males<br>(cont...) |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |   |   |   |  |  |
|--|-----------|-------------|--------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|---|---|---|---|---|--|--|
|  |           |             | 07                 | 07 | 04 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 04 | 07 | 07 | 05 | 06 | 06 |   |   |   |   |   |  |  |
|  |           | ANIMAL ID   | 1                  | 1  | 9  | 1  | 2  | 2  | 0  | 2  | 2  | 1  | 2  | 2  | 1  | 2  | 1  | 0  | 2  | 1  | 4  | 2  | 0 | 4 | 2 | 0 | 4 |  |  |
| Salivary Glands                          |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + | + |  |  |
| Stomach, Forestomach                     |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + | + |  |  |
| Squamous Cell Papilloma                  |           |             |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |   |   |   |  |  |
| Stomach, Glandular                       |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + | + |  |  |
| Tooth                                    |           |             |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |   |   |   |  |  |
| <b>CARDIOVASCULAR SYSTEM</b>             |           |             |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |   |   |   |  |  |
| Blood Vessel                             |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + | X |  |  |
| Aorta, Hepatoblastoma, Metastatic, Liver |           |             |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |   |   |   |  |  |
| Heart                                    |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + | X |  |  |
| Hepatoblastoma, Metastatic, Liver        |           |             |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |   |   |   |  |  |
| <b>ENDOCRINE SYSTEM</b>                  |           |             |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |   |   |   |  |  |
| Adrenal Cortex                           |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + | X |  |  |
| Hepatoblastoma, Metastatic, Liver        |           |             |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |   |   |   |  |  |
| Adrenal Medulla                          |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + |   |  |  |
| Islets, Pancreatic                       |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + |   |  |  |
| Parathyroid Gland                        |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | M  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + |   |  |  |
| Pituitary Gland                          |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + |   |  |  |
| Thyroid Gland                            |           |             | +                  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + | + | + |   |  |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically







Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE MALE                   | 300 mg/kg             | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   | * TOTALS |    |
|------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|----------|----|
|                                    |                       |                       | 0<br>6<br>5<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>6<br>9<br>3      | 0<br>6<br>9<br>5      | 0<br>6<br>7<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>9      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>4      |                       |   |          |    |
| ANIMAL ID                          | 0<br>0<br>1<br>7<br>6 | 0<br>0<br>1<br>7<br>7 | 0<br>0<br>1<br>8<br>8 | 0<br>0<br>1<br>8<br>9 | 0<br>0<br>1<br>8<br>0 | 0<br>0<br>1<br>2<br>1 | 0<br>0<br>1<br>3<br>2 | 0<br>0<br>1<br>4<br>3 | 0<br>0<br>1<br>5<br>4 | 0<br>0<br>1<br>6<br>5 | 0<br>0<br>1<br>7<br>6 | 0<br>0<br>1<br>8<br>7 | 0<br>0<br>1<br>8<br>8 | 0<br>0<br>1<br>8<br>8 | 0<br>0<br>1<br>8<br>8 | 0<br>0<br>1<br>8<br>9 | 0<br>0<br>1<br>9<br>9 |   |          |    |
| Esophagus                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 50       |    |
| Gallbladder                        | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 49       |    |
| Intestine Large, Cecum             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 50       |    |
| Intestine Large, Colon             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 50       |    |
| Intestine Large, Rectum            | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 50       |    |
| Intestine Small, Duodenum          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 49       |    |
| Intestine Small, Ileum             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 50       |    |
| Intestine Small, Jejunum           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 50       |    |
| Adenocarcinoma                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |   |          | 1  |
| Adenoma                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |          | 1  |
| Liver                              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 50       |    |
| Hepatoblastoma                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |          | 1  |
| Hepatocellular Adenoma             | X                     | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |          | 14 |
| Hepatocellular Adenoma, Multiple   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |          | 2  |
| Hepatocellular Carcinoma           |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |          | 7  |
| Hepatocellular Carcinoma, Multiple |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |          | 1  |
| Mesentery                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |          | 1  |
| Pancreas                           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | 50       |    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE MALE                         | 300 mg/kg | DAY ON TEST | ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |    |   | * TOTALS |
|--|-----------|-------------|-----------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----|----|---|----------|
|  |           |             |           | 0<br>6<br>5<br>0 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>6<br>9<br>5 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>1 | 0<br>6<br>9<br>3 | 0<br>7<br>3<br>2 | 0<br>6<br>9<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>9 | 0<br>7<br>3<br>4 | 0<br>7<br>3<br>4 | 0<br>7<br>3<br>9 | 0<br>7<br>3<br>4 | 0<br>7<br>3<br>4 | 0<br>7<br>3<br>9 |    |    |   |          |
| Salivary Glands                          |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +  | 50 |   |          |
| Stomach, Forestomach                     |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50 |    |   |          |
| Squamous Cell Papilloma                  |           |             |           | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1  |   |          |
| Stomach, Glandular                       |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50 |    |   |          |
| Tooth                                    |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1  |   |          |
| <b>CARDIOVASCULAR SYSTEM</b>             |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |    |   |          |
| Blood Vessel                             |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +  | 50 |   |          |
| Aorta, Hepatoblastoma, Metastatic, Liver |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |    | 1 |          |
| Heart                                    |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +  | 50 |   |          |
| Hepatoblastoma, Metastatic, Liver        |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |    | 1 |          |
| <b>ENDOCRINE SYSTEM</b>                  |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |    |   |          |
| Adrenal Cortex                           |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +  | 50 |   |          |
| Hepatoblastoma, Metastatic, Liver        |           |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |    | 1 |          |
| Adrenal Medulla                          |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +  | 50 |   |          |
| Islets, Pancreatic                       |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +  | 50 |   |          |
| Parathyroid Gland                        |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | M                | M                | +                | +                | +                | +                | +                | +                | +                | +                | M                | M                | +                | M                | +  | 44 |   |          |
| Pituitary Gland                          |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +  | 50 |   |          |
| Thyroid Gland                            |           |             |           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +  | 50 |   |          |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 01

#### P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type:** CHRONIC

## Green tea extract

Time Report Requested: 13:10:01

**Route:** GAVAGE

**CAS Number:** GREENTEAEXTE

**First Dose M/F:** 07/10/07 / 07/09/07

**Species/Strain:** MICE/B6C3F1

## Lab: BAT

## C-cell, Carcinoma

1

## **GENERAL BODY SYSTEM**

NONE

GFNITAI SYSTEM

## HEMATOPOIETIC SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X., Lesion present

| ... Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

|                  |   | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | DAY ON TEST |   |   |
|------------------|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------------|---|---|
|                  |   | ANIMAL ID   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID   |   |   |
| B6C3F1 MICE MALE |   | 300 mg/kg   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS    |   |   |
| 0                | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0           | 0 | 0 |
| 6                | 7 | 7           | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 4 | 6           | 6 |   |
| 5                | 3 | 3           | 3 | 3 | 3 | 3 | 9 | 3 | 3 | 3 | 3 | 3 | 6 | 9 | 7 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 4 | 5           | 4 |   |
| 0                | 2 | 2           | 1 | 0 | 0 | 5 | 2 | 0 | 1 | 1 | 2 | 0 | 3 | 5 | 2 | 2 | 1 | 2 | 1 | 0 | 0 | 0 | 0 | 0 | 9 | 4           |   |   |
| 0                | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0           | 0 |   |
| 0                | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0           | 0 |   |
| 1                | 1 | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2           | 0 |   |
| 7                | 7 | 7           | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0           |   |   |
| 6                | 7 | 8           | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0 |             |   |   |

## INTEGUMENTARY SYSTEM

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 1  |
| Skin          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

## MUSCULOSKELETAL SYSTEM

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

## NERVOUS SYSTEM

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

## RESPIRATORY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Lung                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Alveolar/Bronchiolar Adenoma           | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4 |
| Alveolar/Bronchiolar Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Hepatoblastoma, Metastatic, Liver      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

## Nose

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Nose | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

## Trachea

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

## SPECIAL SENSES SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 4  |  |
| Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

|                                   |  | DAY ON TEST | 0<br>6<br>5<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>6<br>9<br>3      | 0<br>6<br>9<br>0      | 0<br>6<br>9<br>3      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>9      | 0<br>7<br>3<br>4      | 0<br>6<br>5<br>4      |                       |                       |                       |          |   |
|-----------------------------------|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|---|
|                                   |  | ANIMAL ID   | 0<br>0<br>1<br>7<br>6 | 0<br>0<br>1<br>7<br>7 | 0<br>0<br>1<br>8<br>8 | 0<br>0<br>1<br>8<br>9 | 0<br>0<br>1<br>8<br>2 | 0<br>0<br>1<br>8<br>3 | 0<br>0<br>1<br>8<br>4 | 0<br>0<br>1<br>8<br>5 | 0<br>0<br>1<br>8<br>6 | 0<br>0<br>1<br>8<br>7 | 0<br>0<br>1<br>8<br>8 | 0<br>0<br>1<br>8<br>9 | 0<br>0<br>1<br>9<br>0 | 0<br>0<br>1<br>9<br>1 | 0<br>0<br>1<br>9<br>2 | 0<br>0<br>1<br>9<br>3 | 0<br>0<br>1<br>9<br>4 | 0<br>0<br>1<br>9<br>5 | 0<br>0<br>1<br>9<br>6 | 0<br>0<br>1<br>9<br>7 | 0<br>0<br>1<br>9<br>8 | 0<br>0<br>1<br>9<br>9 | * TOTALS |   |
| B6C3F1 MICE MALE<br>300 mg/kg     |  |             | 0<br>0<br>1<br>7<br>6 | 0<br>0<br>1<br>7<br>7 | 0<br>0<br>1<br>8<br>8 | 0<br>0<br>1<br>8<br>9 | 0<br>0<br>1<br>8<br>2 | 0<br>0<br>1<br>8<br>3 | 0<br>0<br>1<br>8<br>4 | 0<br>0<br>1<br>8<br>5 | 0<br>0<br>1<br>8<br>6 | 0<br>0<br>1<br>8<br>7 | 0<br>0<br>1<br>8<br>8 | 0<br>0<br>1<br>8<br>9 | 0<br>0<br>1<br>9<br>0 | 0<br>0<br>1<br>9<br>1 | 0<br>0<br>1<br>9<br>2 | 0<br>0<br>1<br>9<br>3 | 0<br>0<br>1<br>9<br>4 | 0<br>0<br>1<br>9<br>5 | 0<br>0<br>1<br>9<br>6 | 0<br>0<br>1<br>9<br>7 | 0<br>0<br>1<br>9<br>8 | 0<br>0<br>1<br>9<br>9 | 1        |   |
| Carcinoma                         |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| URINARY SYSTEM                    |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Kidney                            |  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Hemangioma                        |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |          | 1 |
| Hepatoblastoma, Metastatic, Liver |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1 |
| Renal Tubule, Adenoma             |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1 |
| Urinary Bladder                   |  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| SYSTEMIC LESIONS                  |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Multiple Organ                    |  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |

\*\*\* END OF MALE DATA \*\*\*

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE FEMALE                                   | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...) |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|
|  |             | 0<br>7<br>3<br>0<br>0 | 0<br>7<br>2<br>0<br>9 | 0<br>6<br>3<br>5<br>7 | 0<br>7<br>0<br>5<br>6 | 0<br>6<br>8<br>1<br>5 | 0<br>7<br>3<br>4<br>1 | 0<br>5<br>9<br>0<br>1 | 0<br>7<br>3<br>2<br>2 | 0<br>5<br>8<br>1<br>6 | 0<br>6<br>9<br>3<br>0 | 0<br>7<br>3<br>1<br>1 | 0<br>7<br>2<br>9<br>9 | 0<br>7<br>2<br>2<br>2 | 0<br>7<br>2<br>9<br>9 | 0<br>7<br>2<br>2<br>2 |                       |                      |
| 0 mg/kg  | ANIMAL ID   | 0<br>0<br>0<br>0<br>0 |                      |
| Leiomyosarcoma, Metastatic, Intestine Small, Jejunum |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                      |
| Pancreas   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |
| Lymphoma Malignant                                   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                    |
| Salivary Glands                                      |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |
| Lymphoma Malignant                                   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                    |
| Stomach, Forestomach                                 |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |
| Squamous Cell Carcinoma                              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                    |
| Squamous Cell Papilloma                              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | A                    |
| Stomach, Glandular                                   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |
| <b>CARDIOVASCULAR SYSTEM</b>                         |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |
| Blood Vessel   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |
| Heart  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |
| Lymphoma Malignant                                   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                    |
| <b>ENDOCRINE SYSTEM</b>                              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |
| Adrenal Cortex                                       |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |
| Lymphoma Malignant                                   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                    |
| Adrenal Medulla                                      |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |
| Islets, Pancreatic                                   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |
| Adenoma  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | A                    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type: CHRONIC**

#### Green tea extract

**Time Report Requested:** 13:10:01

## Route: GAVAGE

**CAS Number:** GREENTEAEXTR

**First Dose M/F:** 07/10/07 / 07/09/07

**Species/Strain:** MICE/B6C3F1

Lab: BAT

## **GENERAL BODY SYSTEM**

NONE

## **GENITAL SYSTEM**

### **Clitoral Gland**

Ovary  
Cystadenocarcinoma  
Cystadenoma  
Lymphoma Malignant  
Sarcoma  
Bilateral, Cystadenoma

## Uterus Polyp Stromal

## **HEMATOPOIETIC SYSTEM**

Bone Marrow  
Hemangiosarcoma

### Lymph Node

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically





**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Type: CHRONIC**

**Route:** Gavage

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

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## Lab: BAT

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type: CHRONIC**

## Route: GAVAGE

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

Time Report Requested: 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

# ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE FEMALE   | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |          |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|  |             | 0<br>7<br>2<br>9      |                       |                       |          |
| 0 mg/kg  | ANIMAL ID   | 0<br>0<br>2<br>2<br>2 | * TOTALS |
| Leiomyosarcoma, Metastatic, Intestine Small,<br>Jejunum                    |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
| Pancreas<br>Lymphoma Malignant   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |          |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |          |
| Salivary Glands<br>Lymphoma Malignant                                      |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |          |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
| Stomach, Forestomach<br>Squamous Cell Carcinoma<br>Squamous Cell Papilloma |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |          |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
| Stomach, Glandular   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |          |
| CARDIOVASCULAR SYSTEM  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |
| Blood Vessel   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |          |
| Heart<br>Lymphoma Malignant  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |          |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |          |
| ENDOCRINE SYSTEM   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |
| Adrenal Cortex<br>Lymphoma Malignant                                       |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |          |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |          |
| Adrenal Medulla  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |          |
| Islets, Pancreatic<br>Adenoma  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |          |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Type: CHRONIC**

## **Route: GAVAGE**

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

## **GENERAL BODY SYSTEM**

NONE

## **GENITAL SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Clitoral Gland         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Ovary                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Cystadenocarcinoma     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |   |
| Cystadenoma            |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 2 |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Sarcoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Bilateral, Cystadenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Uterus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Polyp Stromal          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |    | 2 |

## **HEMATOPOIETIC SYSTEM**

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow<br>Hemangiosarcoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node                     |   |   |   |   |   | + |   |   |   |   |   |   |   | + |   |   | + |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE FEMALE            | DAY ON TEST |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |          |
|-------------------------------|-------------|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|                               |             | 0<br>7<br>2<br>9                                     | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      |                       |                       |          |
| 0 mg/kg                       | ANIMAL ID   | 0<br>0<br>2<br>2<br>2                                | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | * TOTALS |
|                               |             | Lymphoma Malignant                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
|                               |             | Mediastinal, Lymphoma Malignant                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
|                               |             | Lymph Node, Mandibular Lymphoma Malignant            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50                    |          |
|                               |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |          |
|                               |             | Lymph Node, Mesenteric Lymphoma Malignant            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50                    |          |
|                               |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |          |
|                               |             | Spleen Lymphoma Malignant                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50                    |          |
|                               |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 6                     |          |
|                               |             | Thymus Lymphoma Malignant                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 47                    |          |
|                               |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
| <b>INTEGUMENTARY SYSTEM</b>   |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |
|                               |             | Mammary Gland  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50                    |          |
|                               |             | Skin Lymphoma Malignant                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50                    |          |
|                               |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
| <b>MUSCULOSKELETAL SYSTEM</b> |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |
|                               |             | Bone   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50                    |          |
|                               |             | Skeletal Muscle                                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4                     |          |
|                               |             | Leiomyosarcoma, Metastatic, Intestine Small, Jejunum |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
|                               |             | Lymphoma Malignant                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
|                               |             | Rhabdomyosarcoma                                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |          |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Date Report Requested: 01/18/2013

Test Type: CHRONIC

Green tea extract

Time Report Requested: 13:10:01

Route: GAVAGE

CAS Number: GREENTEAEXTR

First Dose M/F: 07/10/07 / 07/09/07

Species/Strain: MICE/B6C3F1

Lab: BAT

|                    |   | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |   |
|--------------------|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
|                    |   | ANIMAL ID   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |   |
| B6C3F1 MICE FEMALE |   | 0 mg/kg     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |   |
| 0                  | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| 7                  | 7 | 7           | 7 | 7 | 3 | 0 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 0 | 7 | 7 | 7 | 7 | 7 | 7        | 7 |
| 2                  | 2 | 3           | 2 | 7 | 0 | 2 | 2 | 3 | 3 | 6 | 3 | 3 | 3 | 3 | 3 | 0 | 2 | 3 | 2 | 3 | 3 | 3        | 2 |
| 9                  | 9 | 0           | 4 | 2 | 4 | 9 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 1 | 4 | 9 | 0 | 1 | 1 | 1 | 0        | 9 |
| 0                  | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| 0                  | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| 2                  | 2 | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2        | 2 |
| 2                  | 2 | 2           | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4        | 5 |
| 6                  | 7 | 8           | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8        | 9 |

## NERVOUS SYSTEM

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## RESPIRATORY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Alveolar/Bronchiolar Adenoma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5  |
| Alveolar/Bronchiolar Carcinoma, Multiple      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Carcinoma, Metastatic, Harderian Gland        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Hepatocellular Carcinoma, Metastatic, Liver   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Rhabdomyosarcoma, Metastatic, Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Nose            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Glands, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

## SPECIAL SENSES SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Carcinoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |

## URINARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Type: CHRONIC**

**Route:** Gavage

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type: CHRONIC**

## **Route: Gavage**

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

## ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

## M .. Missing tissue

+ .. Tissue examined microscopically

#### A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

#### I. Insufficient tissue

~~DE WIT NOT EXAMINED MICROSCOPICALLY~~

Experiment Number: 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Date Report Requested: 01/18/2013

Test Type: CHRONIC

Green tea extract

Time Report Requested: 13:10:01

Route: GAVAGE

CAS Number: GREENTEAEXTR

First Dose M/F: 07/10/07 / 07/09/07

Species/Strain: MICE/B6C3F1

Lab: BAT

| B6C3F1 MICE FEMALE<br>30 mg/kg  | DAY ON TEST<br>ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | females<br>(cont...) |
|---|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|---|----------------------|
|   |                          | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>5<br>0<br>6 | 0<br>7<br>2<br>9 | 0<br>0<br>3<br>4 | 0<br>7<br>2<br>9 | 0<br>7<br>0<br>9 | 0<br>6<br>0<br>0 | 0<br>7<br>4<br>1 | 0<br>3<br>1<br>9 | 0<br>7<br>7<br>9 | 0<br>5<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>0<br>2<br>9 | 0<br>7<br>2<br>2 | 0<br>0<br>3<br>1 | 0<br>7<br>2<br>9 | 0<br>0<br>2<br>1 | 0<br>7<br>2<br>9 | 0<br>0<br>2<br>9 | 0<br>7<br>2<br>2 | 0<br>0<br>3<br>1 |   |   |                      |
| Lymphoma Malignant  |                          | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |                      |
| Stomach, Forestomach<br>Lymphoma Malignant  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| Stomach, Glandular  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | A                | +                | +                | +                | +                | +                | + | + |                      |
| <b>CARDIOVASCULAR SYSTEM</b>  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |                      |
| Blood Vessel  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| Heart   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| <b>ENDOCRINE SYSTEM</b>   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |                      |
| Adrenal Cortex<br>Hepatocellular Carcinoma, Metastatic, Liver<br>Subcapsular, Adenoma |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| Adrenal Medulla<br>Pheochromocytoma Benign  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| Islets, Pancreatic  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| Parathyroid Gland   |                          | +                | +                | M                | +                | M                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| Pituitary Gland<br>Histiocytic Sarcoma  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| Thyroid Gland<br>C-cell, Carcinoma  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue



Experiment Number: 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Date Report Requested: 01/18/2013

Test Type: CHRONIC

Green tea extract

Time Report Requested: 13:10:01

Route: GAVAGE

CAS Number: GREENTEAEXTR

First Dose M/F: 07/10/07 / 07/09/07

Species/Strain: MICE/B6C3F1

Lab: BAT

| B6C3F1 MICE FEMALE<br>30 mg/kg   | DAY ON TEST<br>ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | females<br>(cont...) |
|--|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|---|----------------------|
|  |                          | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>5<br>0<br>6 | 0<br>7<br>2<br>9 | 0<br>0<br>3<br>4 | 0<br>7<br>2<br>9 | 0<br>7<br>0<br>9 | 0<br>6<br>0<br>0 | 0<br>7<br>4<br>1 | 0<br>7<br>2<br>9 | 0<br>3<br>2<br>9 | 0<br>7<br>7<br>9 | 0<br>5<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>0<br>5<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 |   |   |                      |
| Lymphoma Malignant   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |   |   |                      |
| Lymph Node, Mesenteric<br>Lymphoma Malignant   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| Spleen<br>Lymphoma Malignant   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| Thymus<br>Lymphoma Malignant   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |                      |
| <b>INTEGUMENTARY SYSTEM</b>  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |                      |
| Mammary Gland  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + | +                    |
| Skin<br>Subcutaneous Tissue, Fibrosarcoma<br>Subcutaneous Tissue, Schwannoma Malignant |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + | +                    |
| <b>MUSCULOSKELETAL SYSTEM</b>  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |                      |
| Bone   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + | +                    |
| <b>NERVOUS SYSTEM</b>  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |                      |
| Brain<br>Histiocytic Sarcoma   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + | +                    |
| <b>RESPIRATORY SYSTEM</b>  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |                      |
| Lung<br>Alveolar/Bronchiolar Adenoma   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + | +                    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue



**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type: CHRONIC**

## Route: GAVAGE

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

Time Report Requested: 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

| B6C3F1 MICE FEMALE | 30 mg/kg | DAY ON TEST | ANIMAL ID |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |    |    |  |
|--------------------|----------|-------------|-----------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|----|--|
|                    |          |             | 07        | 06 | 07 | 07 | 07 | 07 | 00 | 00 | 06 | 06 | 07 | 07 | 07 | 00 | 07 | 07 | 07 | 07 | 07 | 07 | 00       | 07 | 07 |  |
|                    |          | 29          | 29        | 29 | 30 | 1  | 0  | 9  | 1  | 5  | 0  | 5  | 0  | 7  | 0  | 4  | 0  | 3  | 0  | 2  | 9  | 1  | 0        | 8  | 0  |  |
|                    |          | 00          | 00        | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       | 00 | 00 |  |
|                    |          | 27          | 27        | 27 | 28 | 8  | 8  | 8  | 8  | 8  | 8  | 8  | 8  | 8  | 8  | 9  | 0  | 2  | 2  | 2  | 2  | 2  | 2        | 2  | 2  |  |
|                    |          | 6           | 7         | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6  | 7        | 8  | 9  |  |

# ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically: Total animals with tumor

#### M .. Missing tissue

† .. Tissue examined microscopically

#### A.. Autolysis precludes evaluation

X ... Lesion present

BLANK .. Not examined microscopically

#### I. Insufficient tissue

Experiment Number: 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Date Report Requested: 01/18/2013

Test Type: CHRONIC

Green tea extract

Time Report Requested: 13:10:01

Route: GAVAGE

CAS Number: GREENTEAEXTR

First Dose M/F: 07/10/07 / 07/09/07

Species/Strain: MICE/B6C3F1

Lab: BAT

| B6C3F1 MICE FEMALE<br>30 mg/kg  | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |                       |    |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|
|   |                       | 0<br>7<br>2<br>9      | 0<br>6<br>3<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>0<br>0<br>5      | 0<br>6<br>2<br>5      | 0<br>6<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>4      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>1      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>8      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>8      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>8      |                       |                       |    |
| ANIMAL ID   | 0<br>0<br>2<br>7<br>6 | 0<br>0<br>2<br>7<br>7 | 0<br>0<br>2<br>8<br>9 | 0<br>0<br>2<br>8<br>0 | 0<br>0<br>2<br>8<br>1 | 0<br>0<br>2<br>8<br>2 | 0<br>0<br>2<br>8<br>3 | 0<br>0<br>2<br>8<br>4 | 0<br>0<br>2<br>8<br>5 | 0<br>0<br>2<br>8<br>6 | 0<br>0<br>2<br>8<br>7 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>8<br>9 | 0<br>0<br>2<br>9<br>0 | 0<br>0<br>2<br>9<br>1 | 0<br>0<br>2<br>9<br>2 | 0<br>0<br>2<br>9<br>3 | 0<br>0<br>2<br>9<br>4 | 0<br>0<br>2<br>9<br>5 | 0<br>0<br>2<br>9<br>6 | 0<br>0<br>2<br>9<br>7 | 0<br>0<br>2<br>9<br>8 | 0<br>0<br>2<br>9<br>9 |    |
| Lymphoma Malignant  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |    |
| Stomach, Forestomach<br>Lymphoma Malignant  |                       | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49<br>1               |    |
| Stomach, Glandular  |                       | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48                    |    |
| <b>CARDIOVASCULAR SYSTEM</b>  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Blood Vessel  |                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| Heart   |                       | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |    |
| <b>ENDOCRINE SYSTEM</b>   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Adrenal Cortex<br>Hepatocellular Carcinoma, Metastatic, Liver<br>Subcapsular, Adenoma |                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>X<br>1<br>1     |    |
| Adrenal Medulla<br>Pheochromocytoma Benign  |                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>1               |    |
| Islets, Pancreatic  |                       | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |    |
| Parathyroid Gland   |                       | +                     | M                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | M                     | M                     | +                     | +                     | +                     | M                     | +                     | 40 |
| Pituitary Gland<br>Histiocytic Sarcoma  |                       | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48<br>1               |    |
| Thyroid Gland<br>C-cell, Carcinoma  |                       | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48<br>1               |    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type: CHRONIC**

#### Green tea extract

**Time Report Requested:** 13:10:01

## **Route: GAVAGE**

**CAS Number:** GREENTEAEXTR

**First Dose M/F:** 07/10/07 / 07/09/07

**Species/Strain:** MICE/B6C3F1

## **Lab: BAT**

#### Follicular Cell, Adenoma

1

## **GENERAL BODY SYSTEM**

NONE

## **GENITAL SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Ovary                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Cystadenocarcinoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 1  |
| Cystadenoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   | 1  |
| Histiocytic Sarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 1  |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Periovarian Tissue, Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Uterus                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Histiocytic Sarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 1  |

## **HEMATOPOIETIC SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

#### A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

#### I .. Insufficient tissue

DE WIT NOT EXAMINED MICROSCOPICALLY

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Type: CHRONIC**

## **Route: GAVAGE**

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

#### A .. Autolysis precludes evaluation

X .. Lesion present

#### I. Insufficient tissue

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Type: CHRONIC**

## **Route: Gavage**

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

Time Report Requested: 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

|                           |  | DAY ON TEST |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|---------------------------|--|-------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|------------------|------------------|--|
|                           |  |             | 0<br>7<br>2<br>9                     | 0<br>6<br>6<br>9                     | 0<br>7<br>3<br>0                     | 0<br>7<br>3<br>9                     | 0<br>0<br>3<br>1                     | 0<br>0<br>5<br>5                     | 0<br>0<br>3<br>0                     | 0<br>0<br>2<br>7                     | 0<br>7<br>3<br>0                     | 0<br>7<br>2<br>9                     | 0<br>0<br>4<br>0                     | 0<br>7<br>3<br>0                     | 0<br>7<br>3<br>0                     | 0<br>7<br>2<br>9                     | 0<br>7<br>3<br>1                     | 0<br>7<br>3<br>0                     | 0<br>7<br>2<br>9                     | 0<br>7<br>3<br>0                     | 0<br>7<br>2<br>9                     | 0<br>7<br>3<br>0                     | 0<br>7<br>2<br>9                     | 0<br>7<br>3<br>0                     | 0<br>7<br>2<br>9 | 0<br>7<br>3<br>0 |  |
|                           |  | ANIMAL ID   | 0<br>0<br>0<br>0<br>2<br>2<br>7<br>6 | 0<br>0<br>0<br>0<br>2<br>2<br>7<br>7 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>8 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>9 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>3 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>4 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>5 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>6 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>7 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>8 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>9 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>0 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>1 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>2 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>3 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>4 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>5 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>6 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>7 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>8 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>9 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>0 |                  |                  |  |
|                           |  |             | 0<br>0<br>0<br>0<br>2<br>2<br>7<br>6 | 0<br>0<br>0<br>0<br>2<br>2<br>7<br>7 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>8 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>9 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>3 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>4 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>5 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>6 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>7 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>8 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>9 | 0<br>0<br>0<br>0<br>2<br>2<br>8<br>0 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>1 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>2 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>3 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>4 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>5 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>6 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>7 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>8 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>9 | 0<br>0<br>0<br>0<br>2<br>2<br>9<br>0 |                  |                  |  |
| <b>B6C3F1 MICE FEMALE</b> |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
| <b>30 mg/kg</b>           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |
|                           |  |             |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                                      |                  |                  |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

**Test Type: CHRONIC**

## **Route: GAVAGE**

**Species/Strain:** MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

### I .. Insufficient tissue

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Experiment Number: 20203 - 04

Test Type: CHRONIC

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Green tea extract

CAS Number: GREENTEAEXTR

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First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE FEMALE | 100 mg/kg | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  | * TOTALS |
|--------------------|-----------|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|----------|
|                    |           |             | 0<br>7<br>3<br>0      | 0<br>5<br>6<br>4      | 0<br>7<br>2<br>9      |                       |  |          |
| ANIMAL ID          |           |             | 0<br>0<br>3<br>2<br>6 | 0<br>0<br>3<br>3<br>7 | 0<br>0<br>3<br>3<br>8 | 0<br>0<br>3<br>3<br>9 | 0<br>0<br>3<br>3<br>0 | 0<br>0<br>3<br>3<br>1 | 0<br>0<br>3<br>3<br>2 | 0<br>0<br>3<br>3<br>3 | 0<br>0<br>3<br>3<br>4 | 0<br>0<br>3<br>3<br>5 | 0<br>0<br>3<br>3<br>6 | 0<br>0<br>3<br>3<br>7 | 0<br>0<br>3<br>3<br>8 | 0<br>0<br>3<br>3<br>9 | 0<br>0<br>3<br>3<br>0 | 0<br>0<br>3<br>3<br>1 | 0<br>0<br>3<br>3<br>2 | 0<br>0<br>3<br>3<br>3 | 0<br>0<br>3<br>3<br>4 | 0<br>0<br>3<br>3<br>5 | 0<br>0<br>3<br>3<br>6 | 0<br>0<br>3<br>3<br>7 | 0<br>0<br>3<br>3<br>8 | 0<br>0<br>3<br>3<br>9 |  |          |
|                    |           |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |          |

## ALIMENTARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Esophagus   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Gallbladder   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Cecum<br>Lymphoma Malignant            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Colon<br>Lymphoma Malignant            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Rectum                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Duodenum<br>Epithelium, Adenocarcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Intestine Small, Ileum                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Intestine Small, Jejunum                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Liver   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Hepatocellular Adenoma                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Hepatocellular Carcinoma                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4 |
| Hepatocholangiocarcinoma, Multiple                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Histiocytic Sarcoma                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Lymphoma Malignant                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4 |
| Mesentery   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Hemangiosarcoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type: CHRONIC**

#### Green tea extract

**Time Report Requested:** 13:10:01

#### **Route: Gavage**

**CAS Number:** GREENTEAEXTR

**First Dose M/F:** 07/10/07 / 07/09/07

**Species/Strain:** MICE/B6C3F1

## Lab: BAT

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**Experiment Number:** 20203 - 04

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#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

Time Report Requested: 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

NONE

## **GENITAL SYSTEM**

## **HEMATOPOIETIC SYSTEM**

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#### I .. Insufficient tissue

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#### Green tea extract

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**Test Type: CHRONIC**

**Route:** Gavage

**Species/Strain:** MICE/B6C3F1

#### Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

## **SPECIAL SENSES SYSTEM**

## **URINARY SYSTEM**

## **SYSTEMIC LESIONS**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20203 - 04

**Test Type: CHRONIC**

## **Route: GAVAGE**

**Species/Strain:** MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

## Lab: BAT

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically





Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE FEMALE<br>300 mg/kg | DAY ON TEST<br>ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | females<br>(cont...) |  |
|---------------------------------|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----------------------|--|
|                                 |                          | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>1 | 0<br>7<br>0<br>7 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>1 | 0<br>7<br>2<br>9 |   |                      |  |
| Lymphoma Malignant              |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  | X                |                  |                  |   |                      |  |
| Thymus                          |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + |                      |  |
| Lymphoma Malignant              |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |   |                      |  |
| <b>INTEGUMENTARY SYSTEM</b>     |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| Mammary Gland                   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +                    |  |
| Skin                            |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +                    |  |
| Fibrosarcoma                    |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| Subcutaneous Tissue, Sarcoma    |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| <b>MUSCULOSKELETAL SYSTEM</b>   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| Bone                            |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +                    |  |
| Skeletal Muscle                 |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| Lymphoma Malignant              |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| Rhabdomyosarcoma                |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| <b>NERVOUS SYSTEM</b>           |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| Brain                           |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +                    |  |
| <b>RESPIRATORY SYSTEM</b>       |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| Lung                            |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +                    |  |
| Alveolar/Bronchiolar Adenoma    |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| Alveolar/Bronchiolar Carcinoma  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |
| Lymphoma Malignant              |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                      |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20203 - 04

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/18/2013

**Test Type: CHRONIC**

## **Route: GAVAGE**

**Species/Strain:** MICE/B6C3F1

## Green tea extract

**CAS Number:** GREENTEAEXTR

**Time Report Requested:** 13:10:01

**First Dose M/E:** 07/10/07 / 07/09/07

First Dose MT : 07/10/07 / 07/09/07

## Lab: BAI

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

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Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

| B6C3F1 MICE FEMALE<br>300 mg/kg          | DAY ON TEST<br>ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | * TOTALS |
|--|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----------|
|  |                          | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 |   |          |
| Lymphoma Malignant                       |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 1        |
| Stomach, Glandular<br>Lymphoma Malignant |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 49       |
| Tongue                                   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 1        |
| Squamous Cell Carcinoma                  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 2        |
| Squamous Cell Papilloma                  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 1        |
|  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 1        |
| <b>CARDIOVASCULAR SYSTEM</b>             |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |
| Blood Vessel                             |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |
| Heart<br>Lymphoma Malignant              |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |
|  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 2        |
| <b>ENDOCRINE SYSTEM</b>                  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |
| Adrenal Cortex                           |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |
| Adrenal Medulla                          |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |
| Islets, Pancreatic<br>Adenoma            |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |
| Parathyroid Gland                        |                          | +                | +                | +                | +                | +                | +                | +                | M                | +                | M                | +                | M                | +                | M                | +                | +                | +                | M                | +                | M | 35       |
| Pituitary Gland                          |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |
| Thyroid Gland                            |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 49       |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

|                           |  | DAY ON TEST | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>5<br>2<br>9      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>9      | 0<br>5<br>2<br>4      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>0<br>2<br>4      | 0<br>5<br>1<br>4      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      |                       |                       |                       |
|---------------------------|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                           |  | ANIMAL ID   | 0<br>0<br>3<br>7<br>6 | 0<br>0<br>3<br>7<br>7 | 0<br>0<br>3<br>8<br>8 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>8<br>0 | 0<br>0<br>3<br>8<br>2 | 0<br>0<br>3<br>8<br>4 | 0<br>0<br>3<br>8<br>5 | 0<br>0<br>3<br>8<br>6 | 0<br>0<br>3<br>8<br>7 | 0<br>0<br>3<br>8<br>8 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>9<br>0 | 0<br>0<br>3<br>9<br>1 | 0<br>0<br>3<br>9<br>2 | 0<br>0<br>3<br>9<br>3 | 0<br>0<br>3<br>9<br>4 | 0<br>0<br>3<br>9<br>5 | 0<br>0<br>3<br>9<br>6 | 0<br>0<br>3<br>9<br>7 | 0<br>0<br>3<br>9<br>8 | 0<br>0<br>3<br>9<br>9 |
| <b>B6C3F1 MICE FEMALE</b> |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| <b>300 mg/kg</b>          |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| <b>* TOTALS</b>           |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Ovary              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | 49 |
| Cystadenoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Uterus             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Polyp Stromal      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**HEMATOPOIETIC SYSTEM**

|                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Pancreatic, Histiocytic Sarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | 1  |
| Lymph Node, Mandibular          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Lymphoma Malignant              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Lymph Node, Mesenteric          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | 1  |
| Spleen                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Histiocytic Sarcoma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20203 - 04

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Green tea extract

CAS Number: GREENTEAEXTR

Date Report Requested: 01/18/2013

Time Report Requested: 13:10:01

First Dose M/F: 07/10/07 / 07/09/07

Lab: BAT

|                               |           | DAY ON TEST                    | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>5<br>3<br>9      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>5<br>3<br>9      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>0<br>1<br>4      | 0<br>5<br>1<br>0      | 0<br>7<br>3<br>0      |                       |          |    |   |
|-------------------------------|-----------|--------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----|---|
|                               |           | ANIMAL ID                      | 0<br>0<br>3<br>7<br>6 | 0<br>0<br>3<br>7<br>7 | 0<br>0<br>3<br>8<br>8 | * TOTALS |    |   |
| B6C3F1 MICE FEMALE            | 300 mg/kg | Lymphoma Malignant             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       | 3        |    |   |
|                               |           | Thymus                         | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |    |   |
|                               |           | Lymphoma Malignant             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |    |   |
| <b>INTEGUMENTARY SYSTEM</b>   |           |                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |   |
|                               |           | Mammary Gland                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50 |   |
|                               |           | Skin                           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50 |   |
|                               |           | Fibrosarcoma                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | X  | 1 |
|                               |           | Subcutaneous Tissue, Sarcoma   | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    | 1 |
| <b>MUSCULOSKELETAL SYSTEM</b> |           |                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |   |
|                               |           | Bone                           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50 |   |
|                               |           | Skeletal Muscle                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    | 3 |
|                               |           | Lymphoma Malignant             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    | 1 |
|                               |           | Rhabdomyosarcoma               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    | 2 |
| <b>NERVOUS SYSTEM</b>         |           |                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |   |
|                               |           | Brain                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50 |   |
| <b>RESPIRATORY SYSTEM</b>     |           |                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |   |
|                               |           | Lung                           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50 |   |
|                               |           | Alveolar/Bronchiolar Adenoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    | 3 |
|                               |           | Alveolar/Bronchiolar Carcinoma |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    | 1 |
|                               |           | Lymphoma Malignant             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    | 3 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20203 - 04

**Test Type:** CHRONIC

**Route:** GAVAGE

**Species/Strain:** MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Green tea extract

**CAS Number:** GREENTEAEXTR

**Date Report Requested:** 01/18/2013

**Time Report Requested:** 13:10:01

**First Dose M/F:** 07/10/07 / 07/09/07

**Lab:** BAT

\*\*\* END OF REPORT \*\*\*

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically